

## OASIS Alert

### News You Can Use: PREPARE FOR NEW HELP WITH MEDICATION MANAGEMENT

New grant could ease your burden from patients with multiple medications.

Think you have to deal with poor medication management solutions? Think again. The **Visiting Nurse Service of New York** (VNSNY) has received a **Center for Technology and Aging** grant to test technologies designed to help caregivers safely manage multiple medications.

Statistics: Half of home care patients "require assistance in administering their medications and half show some level of functional impairment," according to VNSNY. Also, the average home care patient takes up to eight medications and 20 percent take more than that, the group says.

Clinicians, caregivers, and cognitively impaired patients need a "multi-faceted, ITbased intervention" to help them administer and keep track of those many medications, VNSNY said in a Jan. 20 press release. With the grant funds, the group will introduce automated clinical alerts and education tactics designed to simplify that process.

Note: Learn more about VNSNY's program at [www.techandaging.org/VNSNYProjectOverview.pdf](http://www.techandaging.org/VNSNYProjectOverview.pdf).

- **Have you noticed incorrect payments for therapy visits?** That's because **Cahaba GBA's** Fiscal Intermediary Standard System (FISS) is recoding claims incorrectly.

Example: You submit a claim with a Health Insurance Prospective Payment System (HIPPS) code indicating less than 20 therapy visits, but the claim actually contains more than 20 visits. FISS automatically adjusts that code, but it hasn't been doing it correctly for claims processed on or after Jan. 1, 2010.

FISS maintainers are working on the problem. Until it's resolved, Cahaba encourages providers to submit adjustments with the correct code based on the actual number of therapy visits billed.

- **Simply asking your female patients about conditions prior** to onset of care as OASIS C requires isn't enough to spot urinary incontinence issues.

Researchers surveyed 875 women aged 25 to 80 years enrolled by **Kaiser Permanente Northwest**. Based on their responses, 56 percent experienced urinary incontinence in the past 12 months and nearly 40 percent experienced it in the past 7 days, according to a recent study published in the American Journal of Medicine.

Problem: Only 5 percent of the respondents had incontinence problems documented in their medical records despite visiting a caregiver four times per year on average.

This suggests that though incontinence is a frequent problem, it's going "unrecognized by caretakers," the authors conclude. The "physician-patient communication about urinary incontinence is poor," they say.

Action plan: Don't just ask female patients to answer "Yes" or "No" to a urinary incontinence question. In addition, inquire about some of the symptoms of incontinence, such as whether patients experience incontinence under stress or if they ever wear sanitary napkins or pads to protect against incontinence.

- **If you haven't signed up for the latest home health quality improvement (HHQI) campaign**, you're missing out on free tools to help improve your agency's performance.

The new HHQI campaign headed by CMS contractors **WVMI** and **Quality Insights** has issued its first best practices



package, NAHC notes. The package takes aim at an important topic, Introduction and Fundamentals of Reducing Avoidable Hospitalizations.

More than 4,000 agencies have joined the campaign so far, NAHC reports. You can register for the campaign and log in to download your best practices package at [www.homehealthquality.org](http://www.homehealthquality.org).